ANSWERS TO QUESTIONS FOR THE EQRO ITB # 06-X-2164676

1. Will the Agency provide the names of the organizations that submitted the questions?

Answer: MPRO, TMF, Mevorak Barak, MD and RFP.

- 2. Please provide the name of the current organization providing EQRO services.

 Answer: The previous vendor was Software Engineering Services, 1508 JF Kennedy Drive, Suite 201, Bellevue, Ne 68005
- 3. Section 1.8-Background page 3. This section describes three Medicaid managed care programs but the scope of work only includes activities for two PHP and Maternity Care and none for the Patient 1st program was this intentional? Are bidders to assume that there is no review activites related to the Patient 1st program?

Answer: There are no review activities required for Patient 1st.

4. Section 1.14, page 5. Do the estimated costs (\$100K) include all of the review activities listed in the RFP or are that cost estimate per activity?

Answer: The bid costs will not exceed \$100,000.00 for the entire bid length of two years. For example if you bid \$89,000.00 this would cover annual reports for two years. The Alabama Bid Law guidelines set precedent that the lowest bid that does not exceed the maximum amount and meets all bid criteria, is awarded the bid contract after an evaluation to determine if the bidder's document (response to ITB) meets all criteria.

5. Section 3.7 – Validation of Performance Improvement Projects, page 9. The description does not specify an activity to be performed by the contractor in the same manner as the other activities – are we to assume that the full protocol for validating PIPs is expected as part of this activity?

Answer: The wording on Section 3.7 directs validation of Performance Improvement Projects by defining effective and efficient use of available facilities and services, emphasis of identification and analysis of patterns of care and suggests appropriate changes.

6. Could the Agency please confirm the timeline for deliverables related to each activity?

Answer: To further clarify the agency requires a first draft and final report. The first draft for Maternity Care Program is due 10/02/2006, with the final report due within 30 days of the draft. The first draft of for PHP is due 10/10/2006 with the final report due within 30 days of the first draft.

7. Section 5.2 Transmittal Letter, page 19. Please confirm whether bidders must Certificate of Authority to do business prior to submitting their proposal? Answer: A Certificate of Authority is required for foreign corporations as part of the ITB response.

- 8. Section 3.3 Validation of Focused Study, page 8. This section indicates the contractor should use a 25% sample of each district's studies. Attachment D (Maternity Care Program focused study protocol) indicates data is to be collected from each patient. Can the agency provide an approximate number of patients for each district from which a 25% sample should be selected. Answer: Approximately 14,000 women are included in the study; the actual number is dependent upon the number of women in the focused study.
- 9. Section 3.8, Adherence to Internal Quality Assurance System, page 9. Does Agency intend for the contractor to evaluate 8 separate PHP's adherence for section 3.8 (Adherence to Internal Quality Assurance System) using a standard CMS protocol? Please confirm the protocol and the number of separate entities to be evaluated.

Answer: Yes, each of 8 PHP's adherence to their specific quality assurance system is to be quality reviewed.

10. General. CMS states to conduct 3 mandatory protocols for each MCO/PIHP entity. This ITB requests the proposer to respond with pricing for 3 protocols for 8 PHPs and 14 Maternity Care entities (a total of 22 entities), in addition to completing what is commonly referred to as Evaluating the state's quality strategy. The agency's budget (referenced in section 1.14) is substantially lower than costs would typically be for the activities regardless of the efficiencies or location of the proposer. Could the Agency confirm the intended scope of work it is expecting might be completed for the \$100,000 estimated amount?

Answer: The bid clearly defines the expected scope of work.

11. Page 2, Section 1.2, C-1-Additional state requirements. Are bidders required to have been licensed or established in Alabama for 3 years or in any state in the U.S.?

Answer: In any state in the U.S. or they may be licensed outside of the U.S.

12. Page 7, Section 2.3-Maternity Care Program. This section identified Attachment C as the Maternity Care Operational Manual and Attachment D as the Maternity Care QA Manual. The website for the ITB has Attachment C linked to the Maternity Care QA Manual. However, there is no link to the Maternity Care Operational Manual. Please add the manual to the website, so it can be accessible to potential bidders.

Answer: The website has been corrected to reflect The Maternity Care QA Manual as attachment C1 and The Maternity Care Operational Manual Attachment C2.

13. Page 8, Section 3.3-Validation of Focused Study. This section identifies
Attachment E as 'the current protocol for focused study'. The website for
the ITB has Attachment D identified as Focused Study Overview and linked to a
document entitled "Maternity Care Program Non Clinical Focused Study" with
the study topic of Late Entry Into Care. Please clarify if there is only this one

current focused study or if other protocols (e.g., one or more clinical focused study protocols) are available.

Answer: Late Entry Into Care is the one focused study. It is non-clinical, as opposed to clinical (e.g., vaginal vs. c-section deliveries). This is in compliance with 42 CFR 438.408.

14. Page 9, Section 3.5-Adherence of The Maternity Care Program's Managed Care/Quality Assurance System to Managed Care Regulations. Are the state's prescribed standards for the Maternity Care Program included in the State's Medicaid Plan? If not, where could they be referenced? Are they the same performance standards included in the Maternity Care Quality Assurance Manual?

Answer: The standards are not in the State Plan, because the Maternity Care Program is no longer a Managed Care Program and now operates as a 1915(b) Waiver. Attachment A to the EQRO Bid, is the CFR regulations that govern us. We are under the authority of the Administrative Code, Chapters 21, 43 and 45, which are accessible from the website.

- 15. Page 9, Section 3.7-Validation of Performance Improvement Projects. In order to clarify is each district considered a separate PHP? If so, then there would be 32 focused studies required, correct? Or are there four focused studies for the state that each hospital participates in?

 Answer: The total is four.
- 16. Page 10, Section A-Project Manager. Is there any estimated number of meetings, hearings, etc. the Project Manager may be required to attend? Answer: No, the number of meeting is dependent upon needs.
- 17. Page 15, Section 4.19-Indemnification. The language regarding indemnification against any penalties or federal recoupment is onerous given the limited scope and compensation for this contract. Is there any possibility this could be excluded from the terms and conditions? We realize that there is a very limited risk of any activity involved with this contract resulting in a federal recoupment of Medicaid payments, but given the size of Medicaid billings, this could expose our company to undue risk.

Answer: No Indemnification is required.

18. Who is the current contractor for this work?

Answer: Please refer to question and answer number 2.

19. Are there previous EQRO reports for review by bidders?

Answer: Yes, you may request to view the previous report by scheduling an appointment to come to the agency and review the report.

20. How many review cases were processed in calendar years 2004 and 2005?

Answer: This question is unclear, not sure if this pertains to internal or external reviews.

21. Can you identify the average number of reviews per specialty?

Answer: This question is unclear, since a cite was not mentioned.

22. What is the average time taken currently to perform a review?

Answer: This question is unclear, since a cite was not mentioned.

23. What are your reporting requirements?

Answer: This question is unclear, since a cite was not mentioned.

24. Who is the current vendor? Can you provide the contract and service arrangement with the current vendor?

Answer: Please refer to question number 2. You may schedule an appointment with the agency to review the previous EQRO bid. The bid response is the contract.

25. What is your standard vendor payment policy?

Answer: Payment is by invoice based on deliverables.

26. The anticipated term of this contract is unclear, on page 4 (standard term & conditions) it is indicated as 12 months and on section 1.1 (general requirement) it is indicated as 2 years.

Answer: Page 4 does not contain standard term and conditions; I am not sure what your reference is on this page. On page 1 in Section 1.1, it is stated that the contract is for two years with a possible one year extension.

27. What is your anticipated date of contract award and initiation of operations?

Answer: Please refer to sections 1.9 and 1.10.

28. Do you currently use specific criteria or guidelines for making determinations?

Answer: This question is unclear.

29. Are all the reviews in the Alabama jurisdiction?

Answer: Yes.

30. Can the review be completed offsite? Can medical records be delivered offsite? Is the work strictly onsite?

Answer: There will some onsite and offsite work. Medical records will not be delivered offsite.